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ABSTRACT

A paper on professional and ethical issues involved in teaching behaviorally impaired students is followed by reactions of seven administrators, educators, teachers, and specialists. The paper begins with a review of the literature on teacher competencies and personality traits and notes the importance of such attributes as skill in educational diagnosis and sensitivity to the student's needs. Obstacles to maintaining professionalism in the field of teaching behaviorally disordered students, such as learned helplessness and difficulties in accountability are considered. Factors shown in the research to be linked with teaching success are reviewed, and the rights to be gained through professionalism (including increased administrative support) are noted. Reactions to the paper reveal the perspectives of classroom teachers, administrators, and higher education faculty. (CL)

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BEHAVIORALLY IMPAIRED

A Support System for Services for Behaviorally Impaired

Professional and Ethical Issues Related to Teaching Behaviorally Impaired Students

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Professional and Ethical Issues Related to Teaching Behaviorally Impaired Students

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Professional and Ethical Issues Related to Teaching Behaviorally Impaired Students

Carl R. Smith

Ellen McGinnis

Overview

Many of us were raised in families where our parents were characterized as having a job rather than a profession. This job notion often took on the characteristics of (a) the employer defined the purpose of the work rather than training and/or previous experience, (b) the primary, if not sole purpose was to earn money, and (c) hours of work and duties were carefully monitored and controlled by others. This concept of a job was contrasted with what is defined in Webster's (1971) as a "profession" which is described as a "...calling requiring specialized knowledge and often long and intensive academic preparation."

It is the bias of the writers of this paper that persons involved in the education of behaviorally impaired students should strive to establish themselves as more professional in orientation for many reasons.

For example, let's look briefly at the concept of autonomy. One of the primary characteristics of a successful professional, in our opinion, is the integration of a self-monitored standard of excellence that is partially defined by external standards yet is not totally dependent on the whims of outside sources (others) to make qualitative judgements regarding the adequacy of outcomes. One of the stark realities in advocating for behaviorally deviant students in our schools is that our actions may lead to at least temporary dissatisfaction on the part of others working within the school structure. If we constantly changed our behavior on the basis of the perceived approval/ disapproval of others around us, we would continually be in a state of unproductive flux. Or look at the beginning teacher of such students who is turning to his/her pupils for confirmation of their teaching skills. On the basis of our experience, in such a situation positive reinforcement may be slow in coming and we have to proceed, at least initially, using those interventions which have been shown to be effective with such students. If we choose instead to plan our program on the basis of a daily happiness rating of our students, we are inviting chaos and premature retirement.

This is but one example of where we believe professionalism plays a vital role in our work in educating behaviorally impaired students. This paper will explore many other concepts we believe are related to professionalism in teaching such students. Our discussion will include a review of the possible components of professionalism, some of the problems we have had

in achieving such a status, factors that have been shown to be related to teacher success, and the rights we stand to gain through increased professionalism.

We approach this task head on, and perhaps naively, with the realization that our beginning task, an attempt to define aspects of professionalism, will seem presumptuous to some readers. After all, what qualifies us to speak to such issues!? We have decided to take such a risk on the premise that these issues merit discussion and possible rebuttal. We welcome your reactions and comments to correct, clarify and sythesize the ideas we offer.

Professionalism - What Does it Include?

Let's first look at the personal and professional expertise to be considered within the domain of professionalism. What teacher qualities are necessary to provide successful educational experiences for behaviorally impaired students? A colleague of ours recently stated "just give me a teacher who is open and genuinely cares, and I can teach him the skills." Perhaps our colleague is correct in the sense that the personal characteristics of openness and caring are vital ones. Yet, without specific skills to manage a classroom of behaviorally deviant students with complex needs, we question how long the most understanding and well-meaning person can continue to be open and caring!

After reviewing the literature pertaining to the attributes of successful teachers of the behaviorally impaired Shea (1978) emphasizes the importance of both personality and skill traits of these individuals and concludes that the successful teacher "...accepts the child as an individual worthy of respect; at the same time does not accept the child's inappropriate behavior." (p. 197) Long and Newman (1971) also seem to value both skill and personality traits in such teachers when they state, "If management tasks are not done with some humor, warmth, firm quietness, or cheer, they will not work..." (p. 401). We believe that these personality and skill traits are intertwined in good teaching of the behaviorally impaired and it may be an impossible task, and perhaps of questionable utility, to attempt to choose which of these is more important. In the following discussion we will discuss these variables separately although this is merely the luxury of writing a paper where you can separate out variables which, in the real world are intertwined and not so easily broken apart.

A model of skill competencies for teachers of the behaviorally impaired, presented by Morse (1971) includes flexibility, empathy for the feelings of the student, and sensitivity to his/her moods. Morse further states that the teacher must provide for "fun" as well as skill development, set routines, enforce limits, motivate, structure and individualize the curriculum, and employ "good teacher methodology." Hewett (1970) provides us with a "heir-

archy of teacher competencies" specific to teachers of the behaviorally impaired which includes objectivity, flexibility, structure, resourcefulness, use of social reinforcement, curriculum expertise, and intellectual modeling. In addition to specific personal characteristics Shea (1978) advocates for the inclusion of knowledge of other areas such as therapeutic techniques, abnormal psychology, and counseling.

From such models we can conclude that teacher competencies are comprised of personal characteristics, as well as background knowledge in the field of behavior disorders and related areas, teaching and therapeutic skills (Hewett and Taylor, 1980), management techniques (Kounin, 1971), and skill as an academic and behavior diagnostician (Fenichel, 1971, Morse, 1971). The teacher's role further includes collaboration and consultation (Knoblock and Garcea, 1969) with other professionals.

It is recognized that no single approach to behavior disorders can provide the teacher with the strategies to deal with the variety of problems exhibited by such students. Thus, it is necessary that the teacher possess knowledge of the various approaches to this disability (Rhodes and Tracy, 1972). Only by pulling from such a base, can the teacher devise strategies to meet the needs of individual students.

Due to the relative newness of this field of special education, it is the professionals goal to continue expanding his/her knowledge of behavior disorders and of related areas. This too should be a value of the educational system in which the teacher operates. With day to day teacher concerns, the teacher will find support personnel and inservice programs playing a valuable role.

In addition to an established, though perhaps continually changing philosophical base, these teachers must have general teaching skills. Morse (1980) states that "first, special children and youth are non-special children in their basic needs" (p. viii). These children, also need to find enjoyment in the process of learning! The skills needed to attain this goal are those general skills of teaching, such as managing the classroom environment, group and individualized instruction, and curriculum expertise.

With the knowledge that academic deficits are often found with behaviorally impaired students (Walsh and O'Connor, 1971; Bower, 1969; Stone and Rowley, 1969) the role of the teacher as an educational diagnostician is essential to determine the student's level of academic functioning, areas of weakness and specific strengths, and to integrate these results in the development of effective methods for instruction. Furthermore, it is accepted that competency in academic skills, in addition to their worth in and of themselves, can contribute to a student's increased self-concept and opportunities for partic-

ipation in regular education.

Using such diagnostic skills in the behavioral domain, the teacher can seek answers to such questions as: What is the behavior of concern? When, or under what conditions, does the behavior occur? What is the frequency of occurence? Through this type of an assessment, interventions can be designed and behavioral progress recorded.

The necessity of managing the student's behavior is apparent. Varied techniques exist, from ones externally applied (ranging from the use of positive reinforcement systems to punishment techniques) to self-management strategies which rely on a student's self-control. The teacher must not only have these skills but be able to judge their effectiveness and know when to let up on external structure.

Successful teaching of behaviorally impaired students does not end with the implementation of academic and behavioral management techniques, however. Instruction in self-control and study skills may be necessary to facilitate academic and behavioral learning. These students also may need specific instruction in pro-social skills. The teacher must ask the question: Is the student proficient in the desired behavior? If he/she is not, the teacher must teach it!

The affective realm in the education of behaviorally impaired students, has recently gained emphasis. Morse, Ardizzone, MacDonald and Pasick (1980) state:

"Recognizing hazards of growing up 'special' in this society the mental health obligations of special education are even more crucial." It is not a question of the affective domain versus the cognitive or motor domain. The goal is affective, cognitive, and motor learning in proper balance, dictated by the needs of individual pupils. Because many handicapped children have difficulty with their cognitive learning and schools are traditionally the place for teaching the three R's, the affective sector has often been neglected or left to haphazard efforts. (p. 1)

Morse (1980) also emphasizes that "since our special children are by definition having difficulty in the affective area, the utilization of affective methodology becomes necessary." (p. 26) Such methodology includes the assessment of the student's feelings as they relate to the school setting. For example, How do the students perceive their abilities regarding school status, behavior and relationships with others? How do these feelings appear to be interacting with academic and social learning? The answer to <u>why</u> the student is reacting in such ways perhaps will never be determined, and this is not the purpose of such an assessment. Rather, the information yielded from this type of evaluation can provide insight into the student's difficulties and provide an initial step in changing these feelings which interfere with interpersonal relationships, personal

adjustment and problems in learning.

If the tasks described up to now are not enough, the teacher of behaviorally impaired students also is called upon to teach his/her students skills which are necessary in environments outside of the special education program. As White (1980) states:

> Much time, money, effort and concern are put into acquisition of the initial behavior change in the BD classroom. Since return to the regular classroom is the generally accepted goal of programming for BD students, we need to do everything possible to insure that behavior gains are of long duration and that they generalize to other settings. (p. 18)

In addition to academic competencies such student skills will include personal coping skills and the confidence to attempt difficult tasks.

Aside from those skills used in direct work with students, teachers of the behaviorally impaired also need to be willing to collaborate with support personnel, such as the social worker, school psychologist, consultants, other teachers, and administrators without believing that this is, in any sense, a sign of failure or weakness. He/she should also be willing to utilize the parents' understanding of the child and exchange with them suggestions and support. We believe that such collaboration contributes to the understanding of the student as a total individual.

The ability and self-confidence to share expertise with noneducators (i.e., physicians and mental health personnel) is a further area of needed collaboration. The teacher, perhaps next only to the parents, has the most extensive direct experience with the student. With this combination of unique expertise and knowledge gained from contact with the student, the teacher can be an excellent resource to non-education professionals. We will discuss further perceptions of this collaboration later in this paper.

Teachers of behaviorally impaired students also must secure recognition of possessed competencies in a non-threatening manner. In other words, he or she must not come across affectively as "the expert", yet still convince others of his/her expertise. The purpose of this is not solely to provide reinforcement you may deserve, but for other reasons, also. First, since behavior problems are not specific to those students identified as deviant, the willingness to provide ideas for dealing with problem behavior can help other educators work more effectively with <u>all</u> students. In turn, successful teacher interactions with behavior problem students can contribute to their understanding and tolerance of student differences. This, then, results in the teacher's role as a valued resource person. Second, by sharing this expertise, the goal of reintegration of behaviorally impaired students can be

assisted. Insight into the characteristics of the handicap itself and methods of intervention can also serve to lessen apprehension in contacts with identified deviant pupils. Third, the regular educator can serve an important function as a referral source (Walsh and O'Connor, 1971), and an understanding of this handicap can aid in the appropriateness of these referrals.

Recognition of these specific skills possessed by teachers of the behaviorally impaired can therefore serve a valuable function in furthering this area as a profession, as well as meeting the needs of individual special and regular education students. However, too often such recognition may be difficult to establish, for behaviorally deviant students traditionally are not the most loved individuals in the school! Then again, just when you think that you and your student have made it, the student's "one incident" seemingly wipes away all previously recognized progress. Careful recording of the actual student progress therefore serves as an invaluable means to establish deserved recognition for the student, as well as for the teacher.

What personality characteristics are important for those who teach this group of handicapped students? Hewett (1970) states that such a teacher must be:

"Tender without being sentimental, tough but not callous, sensitive but not irratable, possessed by conviction, profoundly aware without loss of spontaneity, trusting in the intuitive humane responsiveness of one's self and one's colleagues, and self-actualized." (p. 335)

This statement, though appearing more descriptive of a saint rather than a teacher, clearly stresses the importance of personal attributes needed. Teachers of the behaviorally impaired must be sensitive to the student's emotions, interests, and needs. He/she must have the integrity to follow through with these judged needs even though doing so may not contribute to popularity within the system. Yet, too, he or she must be sensitive to recognize the frustration of others with whom the student interacts and provide support when indicated. The teacher must be caring - caring enough to set limits and enforce consequences, yet careful not to lose sight of the student as a unique person.

The teacher of the behaviorally impaired must be all these things while still being a teacher! Fenichel (1971) states this phenomenon:

In reacting to the educational and social needs of her children, the teacher's role is an active, directive, comprehensive and diversified one: she relates while she instructs, suggests, sustains, informs, corrects, clarifies, protects, modifies, calms, supports, limits, stimulates, reassures, intervenes, encourages and

guides. (p. 344)

In addition to the abilities of relating to the student with sensitivity and caring, while still seeking mastery of academic and social skills, these authors perceive the quality of openness as crucial within the dimension of professionalism. Such openness allows for acceptance of new ideas, of changes in the students, and allows for self-evaluation.

Secord and Backman (1964), from their work in social psychology, list several "tendencies" of persons when viewing others . These are the tendency to view people as "unchanging entities", to see the reason for a person's actions as "lying in him rather than in the situation", to allow another person's evaluation to cloud one's own perceptions, and to place "persons in ready-made categories associated with sets of personal attributes." Simpson (1966) proposes that a teacher's ability and openness to self-evaluation can "reduce biases and undesirable distortions" of his/her perceptions of a student.

Self-awareness, or acknowledgement of the teacher's own values and needs in interactions with students, is another part of openness. Fenichel (1971) states:

"Each teacher brings into the classroom her own unique style of work as well as her own standards, values and needs. She, in turn, must try to understand the unique style and process by which each child learns. She must develop sufficient self-awareness to recognize if her own values, needs and style of work are furthering or interfering with the program and needs of her children." (p. 344)

Within this dimension is the ability of the teacher to evaluate a student's behavior without passing judgment on the student. It is natural to view others biased by our own needs and values, but it is even more necessary to be aware of this tendency when working with this population. The teacher still must demonstrate acceptance of the student and be open to their worth as a person and their potential for change.

Integrity to use the power existing within the teacher role in responsible ways is also needed. The teacher has an unstated, powerful effect on students by virtue of the amount of time spent with them and the power of the teacher inherent in the school setting. Behavior management strategies provide a further means to assert power. With the desire to "fix" the student and make his/her behavior more acceptable in the school world, excessive demands on student behavior may unconsciously be made.

Hamacheck considers this by distinguishing between rational and irrational obedience (Raffini, 1978). Irrational obedience is "the unquestioning obedience" or "doing as told" and one attributes the responsibility for ones actions to authority. Rational obedience, on the other hand, "retains the essence of

each person's ability or capacity to obey with discretion" and the individual takes the responsibility for his/her behavior.

From a similar viewpoint, Morse (1981) distinguishes between authority which has validity and authoritarianism in relation to the education of adolescent age students:

"Authority is quite another thing from authoritarianism. It is interactive. It is respectful. It is flexible. It is empathetic...the goal is to solve a social problem, to develop an acceptable social and intrapersonal process...we all respond to that authority which has validity." (p. 9)

Morse lists deterrents to this desirable type of authority as: " defending rules which we cannot explain, insisting that students accept unreasonable demands, avoiding dealing with the environment which needs change, not speaking out about unfairness, and not understanding the dilemma of the adolescent well enough to be able to explain what is going on." (p. 9) When teaching behaviorally impaired students, then, the teacher need to be cautious that compliance is not being requested for the sake of compliance. When a teacher makes a request of a student and is unable to think of a good reason for this, he/she must be open enough to stop and reevaluate this demand.

We have seen that the skills of teachers of behaviorally impaired students are complex. From such a review this profession does indeed require "specialized knowledge", and a very special person to fill such a role.

In all this giving of a teacher's self, however, what are the potential dangers to this self? Recently education journals have been filled with articles related to teacher stress and burnout. With the demands such as we have described, is burnout a likely reality for these teachers? Past and present teachers of emotionally disabled students (33 teachers) in one area education agency in Iowa were surveyed by Lawrenson and McKinnon (1980). These teachers consistently reported that the most significant satisfaction was their relations with students. The most frequently cited areas of dissatisfaction were the lack of support from the administration (also the number one reason given by those who had left this area of teaching), inconsistent support staff, and the amount of clerical work required. These three problems can be considered as a conflict with "the system." Bloom (1981) presents several variables to be considered in teacher reactions to the system, which in turn may also affect relationships with students.

One such variable is described by Bloom as "Implementation Despair." This happens when the rules of the school prevent the teacher from implementing strategies which he/she believes will be most effective, and results in frus-

tration and anger when they must use less effective ones. These feelings are then conveyed, directly or indirectly, to the students. Anger such as this may also result from another's actions toward the behaviorally impaired student. This "Anger At One's Teammates" may occur when, for example, the student is suspended from school for verbal aggression when you recognize this as definite progress from the physical aggression he/she demonstrated in the past. Bloom discusses the possible results of this conflict:

"Although at times it is certainly true that the catalogue of errors other educators make with disturbed adolescents is infinite, that parents undo the good work we have accomplished, and that therapists working with one youngster at a time don't know what it's like in our classroom, the angry feelings reflected in our silent accusations do not enhance our teaching affectiveness with disturbed adolescents. On the contrary, our personal antipathies may have counterproductive effects on students." (p. 5)

The "I/We Can Do It Better Syndrome" may be another result of this anger. In this conflict, the teacher plans to prove to those who have been critical of their actions, the superiority of his/her own ideas. Bloom says: "Our need to show that we can 'do it differently and better than anyone else' often leads us into impossible situations" (p. 6). When the idea does not work, the teacher must deal not only with the initial anger, but with a new anger as well.

Bloom discusses conflicts in the student-teacher relationship which result from a teacher's lack of awareness of "the personal stress and conflict" he or she is experiencing. For example, "Helplessness Rage" is likely to occur when the teacher, aware of his/her affections for the student, attempts warm and friendly interactions, but is met with hostility. The teacher may be confused and offended that he/she did not receive reciprocal warmth as expected. Thus, this creates a cycle of negative interactions, as the teacher reacts punitively and even more hostility is illicited from the student.

Another variable is termed by Bloom as "Success and the Time Warp." In such a situation, the teacher notes that the student has begun to improve. The teacher's hopes are raised and he/she pushes for further gains. When the student fails, the teacher then is disappointed and frustrated. Weiskopf (1980) also discusses this as a factor in the burnout of teachers of the behaviorally impaired:

"A teacher may set unrealistic goals for students to achieve. When goals are not realized, feelings of failure produce emotional stress, thereby lowering the teacher's self esteem and self-confidence." (p. 19-20)

Bloom calls for accepting "the inevitable ups and downs of

our students" and "the time it takes for new learning to become secure." (p. 7) As stated by Cohen (1970) "What these children need is...someone who can live with, accept, understand, and see the need for these regressions without becoming threatened or disrupted by them herself." (p. 344)

When a student misbehaves especially within the view of others, we may tend to assume the responsibility for the misbehavior. After all, isn't it the teacher's responsibility to have good discipline? Bloom refers to "Paranoic Sellouts" or actions which are not related to the actual needs of students. Instead, we react to our need not to experience failure.

"Complexity Shock" (or when what we know to work, doesn't) occurs often with behaviorally impaired students. Furthermore, we know that a given technique works for awhile, then may cease to work anymore. Yet, this too, has the potential to leave the teacher angry. All these areas of conflict can lead to "learned helplessness" (a concept we will discuss later in more detail) or to what Bloom refers to as "Retreat Into Professional Neutrality." In this reaction, the teacher deals with her feelings of helplessness, not in anger, but in avoidance. Instead of dealing with the failure and attempting other techniques (such as speaking out for changes in the system which could ease the the success of the student) the conclusion is drawn that the student is untreatable. Bloom stresses the importance of dealing with these potential conflicts through self-evaluation and self-awareness. "It's not that everyone can succeed with every disturbed teenager. Rather we must honestly search within ourselves for the real reasons we move away from youngsters." (p. 7)

Bloom has presented many variables to consider in teaching behaviorally impaired youth. His purpose in doing so, and ours for discussing them here, is to "help teachers to recognize, experience, and have their feelings..." (p. 4), for this, too, is a part of professionalism.

Problem Areas

Despite our field's relatively short history we have encountered many problems in establishing and/or maintaining our professionalism. It is the purpose of this section to discuss several of these problem areas.

The "Because it's tradition" Syndrome.

The field of educating behaviorally deviant school-aged students largely emanated from the larger area of therapeutic interventions with such students. Many of the first school programs for such youngsters appeared in mental health settings. The establishment of school programs in such settings was considered a progressive step. As Rhodes and Paul (1978) describe this historical development:

"Unless the student could be brought back into reason, that is unless he or she could be exclusively cognitive while in the classroom, education was not possible. It was not long ago

(perhaps fifteen years) that both educators and superintendents of mental hospitals assured us that there was no point to classrooms in mental hospitals. When the child was 'cured' and only then, could he or she be educated. Reasonableness and non-reasonableness were mutually exclusive human qualities." (p. 274)

When education did move into clinical settings it was often viewed as an adjunct to treatment programs provided for such youngsters. Decisions regarding the behavioral needs of such youngsters as well as length of stay and other decisions were primarily made by clinical staff. Even as programs for behaviorally deviant students have moved into the public schools many persons still turn to allied professionals such as clinical psychologists, psychiatrists or social workers to interpret the significance of behavioral patterns of pupils and to influence the content of the educational program. If you look back at our professional literature, especially that written prior to 1970, you will note that noneducators were often writing about what an educator's work should be with behaviorally impaired students.

We believe that this sequence of events has led to two major problems we face in establishing our field as a profession. These are (1) the tendency to look to other professionals to define our work and (2) our tendency to hide behind the cloak of "EDism."

We believe that there is a particular body of knowledge and skills relevant to teaching behaviorally impaired students that are not within the repertoire of allied professions such as clinical psychology or psychiatry. This includes such areas as group management of behaviorally deviant students in the classroom, teaching academic skills to such students, teaching social skills via individual and group interventions, relating to professional education colleagues and a closer appreciation of the role of school in society. Our training and present experiences reflect these skill areas.

Such a notion does not mean that we close ourselves off from possible collaboration and consultation with allied professionals. To do so would be narrow minded and foolish. But we are advocating that we consult with such colleagues rather than turning to them to define our work. Does it make sense to ask a psychiatrist to define who is handicapped in an educational setting? Does it make sense to ask a social worker what curriculum we should use? Should a psychologist be expected to design our group management program? We believe that these are professional educational decisions.

Hiding behind the cloak of EDism relates to our tendency to explain our professional role by using terminology and concepts more relevant to non-educational settings. Grosenick and Huntze (1980) allude to this tendency when they state:

"The label 'seriously emotionally disturbed' tends to

focus on children and youth with disturbances of behavior that are psychiatrically defined and/or intra-psychic. While these children and youth are appropriate for services in public education, they are only a small portion of the types of serious problems that public schools face. Many of the most serious school concerns involve behavior that has no psychiatric overtone." (p. 22-23)

Peterson, Zabel, Smith and White (in press) surveyed teachers of the behaviorally impaired in three midwestern states and asked how many of the students served by these teachers were actually emotionally disturbed, with clinical implications versus how many were more accurately described as behaviorally disordered. The results of this study indicate that more behaviorally disordered pupils are perceived as being in such programs, especially the less restrictive models.

We, as professional educators, have unique skills, methods ad vocabulary. What can we do with such syndromes as "symbiotic psychosis" or "obsessive-compulsive neurosis"? We can, however, design and implement programs for youngsters who are consistently exhibiting inappropriate classroom behavior, for the youngster who is the social isolate in the regular classroom or for the youngster who is consistently physically aggressive with his/her classmates. By using such terminology, we are stressing the point that we are specifically trained professionals with skills of our own.

"Who me? Failure syndrome."

Failure is certainly not a foreign concept to our work with behavioraly impaired students. A lack of failure is certainly not a prerequisite for competency in many fields. Perhaps the most important variable to keep in mind is our reactions to such failure situations.

One of the most unproductive stances we can take when faced with failure is what has been described in professional literature as "learned helplessness" (Seligman, 1975). This is a term used to describe how we can actually develop a habit of acting as if what we do will not make any difference. As Seligman (1975) has described:

"Learned helplessness produces a cognitive set in which people believe that success and failure is independent of their own skilled actions, and they therefore have difficulty learning that responses work." (p. 38)

Perhaps as educators of the behaviorally impaired we need to keep in mind the prayer authored by Reinhold Niebur and adopted by Alcoholics Anonymous that reminds us to seek serenity in accepting the things we cannot change, assert the courage to change the things we can and acquire the wisdom to know the difference.

There are some things we cannot change in our work. Often our students may be facing a myriad of problems; some related to school, some related to home,

some related to the community and all the possible combinations therein. In addition, as implied in the work of de Lone (1979), many of our students may also be suffering from basic economic poverty. In relation to this we need to remember that we are striving to acquire positive control over one setting (school) and our work may or may not carry over into other settings.

In these situations where failure is caused by factors out of our control one of the major problems we have had professionally is our reaction to such failures. We may have a tendency to model inappropriate responses to failure. Such inappropriate responses take the form of comments such as, "I've done everything I can do. It's the _____ (parents, principal, teachers, therapist--or fill in any combination) fault he/she is still doing poorly." Or "he/she is just too sick to learn." To our way of thinking a more productive approach would be to assess the adequacy of our current approach (on the basis of objective data, of course), and to make a change in our program approach accordingly. Such an approach encourages us to be more honest regarding the lack of success in our current approach, involves other professionals in making necessary changes and establishes a means by which we evaluate the new approach. Although this delineates one means of modifying our approaches, it is important to again stress that some failures will be the result of variables out of our control and beyond our success potential.

But let's also look at some areas that are clearly within our control that have not necessarily been sources of success, yet should be. This includes the degree to which we truly individualize instruction and the rate of reintegration we have achieved with our students.

In implementing the concept of individualized instruction do we demonstrate flexibility, within reason, in our classroom rules? Do we really plan our programs according to individual needs or do we fall back on the structure to which we have grown accustomed? Have we persisted in our structure long past the point of necessity? Do our IEP goals and objectives vary from student to student? These are but a few of the questions we need to ask in relation to our proficiency in truly individualizing instruction.

Programs for the behaviorally impaired are based on the philosophical premise that it is possible to program for an individual youngster, change the offending behavior and allow the student to return to regular education after a period of time. These assumptions are mentioned by Smith (1978) who states:

"Programs in the areas of emotional disabilities and chronically disruptive should be based on the following assumptions: behavior is a dynamic phenomenon and is amenable to change; appropriate special education programming contributes to positive behavioral changes; pupils must be given an opportunity

to exhibit their newly acquired, more acceptable behavior patterns; behavior change is necessary for the student's best interest; needs in addition to the behavioral area, i.e. academic, must also be met in these programs; and, these programs provide specific components which cannot be adequately and consistently provided for in other special education or regular education programs." (p. 6)

Despite these platitudes it does not appear that we are doing a very good job of successfully returning the students we serve to regular education (Smith, White and Peterson, 1979; Peterson, Zabel, Smith and White, 1980). While it is important for the teacher of the behaviorally impaired to have support with integration efforts, it appears that much of the success of such a procedure will be dependent on the efforts of the teacher. As Smith, White and Peterson (1979) state:

"...it appears that the ED teacher has primary responsibility to coordinate integration efforts, is more likely than any other professional to be involved in this process and is given primary responsibility for follow-up. Yet, most of these teachers indicated that procedures for integration were not clearly defined, that a systematic pupil accounting system was not in place, that time is not allowed in their day for planning integration, and that in-service training for regular classroom teachers is not usually provided. In addition, it appears from this study that these teachers primarily use more subjective measures in determining an individual child's readiness to return to the regular classroom." (p. 33)

Looking at conclusions such as these it becomes apparent that an improvement in our ability to return served students to regular education would seem to compliment our desire for improved professionalism. This may include both an increase in systematic programming by classroom teachers and increased advocacy to ensure that other professionals assist in such a process.

"IEP? It's in my head."

This leads us to one last area we would like to discuss under problems in professionalism. Whether we like to or not our work is being more and more closely scrutinized as to quality by consumers and non-educators. As Brown and Palmer (1977) note, in relation to education of behaviorally impaired students:

"The burden of responsibility for developing individualized educational plans and for defining what is meant by the word appropriate is the teachers. Thus, inadequately trained teachers will no longer be tolerated by parents who more and more are turning to litigation to assure appropriate services for their children. With Public Law 94-142 on their side, parents clearly have the legal right to

expect teachers to be well qualified to provide their children an appropriate education." (p. 174)

Due process proceedings are very much a reality in special education today. These proceedings generally deal with the appropriateness of what is being proposed for an individual student. The field of behavior disorders has had it's share of nebulous nonspecifiable practices in the past. While creativity is to be encouraged, it is important to keep in mind that if you are involved in due process proceedings you will be called on to define behaviorally, whether you want to be associated with such a philosophical base or not, the hows and whys of what you are doing. As Martin (1975) states:

"Intervening in someone's life to change his/her behavior is a potential deprivation of liberty sufficient to raise constitutional issues. Such intervention should be limited to behavior which is within the legitimate interest of the institution involved and which actually occurs and is intolerable." (p. 13)

Teacher Success

We have discussed areas of difficulty in establishing teaching the behaviorally impaired as a profession. We now turn to how we can authenticate this profession and therefore logically, or innocently, look to what makes a teacher successful. In considering this question, we are first aware that the determination of successful teaching rests largely on the person or persons defining success, whether they be administrators, parents, other educators, or the teachers themselves. We, too, have presented what we believe to be necessary competencies for teacher success. We also recognize that this determination is further dependent upon the criteria used to measure this success. For example, do we use the criteria of increased academic competency, or nondeviant behavior of the identified students within the special classroom? Perhaps teacher success should be determined on the basis of successful reintegration of these pupils? With these limitations in mind, we will review the literature available on this topic, first in the area of general teaching success and then more specifically related to teaching the behaviorally impaired.

Various personality characteristics of teachers are supported as factors which distinguish successful teachers from those not-so-successful. Several studies indicate that the qualities previously discussed, such as the ability to view others in positive ways, openness to self-evaluation and emphasis on the teacher-student relationship are characteristics of a successful teacher.

The three "key characteristics" of good teachers cited by Ryans (1961) are: 1) favorable attitudes toward students; 2) enjoyment of relationships with students; and, 3) positive appraisal of the motives of other persons (Simpson,

1966). Possessing a positive view of others was also viewed as a quality of effective teachers in a review of research by Hamacheck (1971). This quality, interrelated with other attributes such as a favorable perception of a democratic classroom, ability to empathize with others, and viewing students as capable individuals appeared to differentiate between effective and less effective teachers. Larrivee (1981) found that warmth, teacher responsiveness and fairness, and a positive relationship with students were also characteristics of such teachers.

The attributes of empathy and relationship orientation which were supported as characteristics of effective teachers of regular students were also found desirable for teachers of the behaviorally impaired (Solden, 1980). Other personality factors concluded by this research were a strong self-concept, a balance of introversion and extroversion, and the ability to establish authority but not in an authoritative manner. Solden summarized these findings: "All teachers (determined effective) seemed to believe that firm leadership was needed, yet always tempered with sympathy and understanding." (p. 61)

Characteristics attributed to successful teaching of the behaviorally impaired was more widely researched in the 1950's and 1960's than since that time (Shea, 1978). We can conclude, however, that the qualities of teaching success in general are indicative of those desirable in teachers of this population. The results of two studies specific to these teachers confirm the validity of such an inference.

The most important attributes of teachers of the behaviorally impaired, based on the school superintendents (Rust, 1966 as reported by Shea, 1978) were: emotional stability, patience, considerateness, judgement, flexibility, and originality (Shea, 1978). Traits of successful teachers from teacher self-ratings (Nagle and Gersh, 1968) were: large investment of energy with few expectations of a return of this investment, acceptance of one's own feelings and independence (Shea, 1978).

The first factor of the latter study brings to mind the conflict which was presented by Bloom (1981) as "Helplessness Rage", and a factor in the burnout of teachers as discussed by Weiskopf (1980). Perhaps, this too is a factor in "emotional stability" as listed as the most important attribute in the earlier Rust study.

In addition to personal factors in determining success, researchers have found that the factors of teaching approaches and behavior management techniques related. A replication of the early Mackie, Kvaraceus, and Williams (1957) study (which found that teachers needed good judgement, sense of humor, adaptability, flexibility, realistic perceptions of others, consciousness of one's own limitations, and personal contacts aside from school) was carried out by Bullock and Whelan (1971). These teachers unlike

the results of the earlier study, stressed the importance of individualizing programs, a knowledge of the principles of education and psychology of exceptional children, the ability to act as part of a interdisciplinary team, and behavior management skills.

Rosenshine and Furst (1971) reviewed many correlational studies which attempted to relate teaching behavior with academic gains of students. From this review the authors concluded that the five factors of clarity of presentation, variability of materials and techniques, teacher enthusiasm, task orientation, and presentation of relevant material to the assessment of student progress were the variables which most closely related to student achievement.

The seven year study of secondary age students by Rutter, Maughan, Mortimore, Ouston, and Smith (1979) and also supported by Larrivee (1981) concluded that students demonstrated more appropriate behavior when the teacher was well-planned, provided a pleasant atmosphere where few reprimands were necessary, provided immediate and direct feedback and opportunities for the students to assume responsibility, and also expected the students to do well.

Teacher skills in regular education classrooms which included one or more emotionally disabled students was researched by Kounin and Obradovic (1971). They suggested that specific techniques do, in fact, "determine how children behave in a classroom (and) they have about the same effect upon emotionally disturbed children as on non-disturbed children." Factors which positively related to the involvement of students in their work and lack of deviancy were: ease of transition from one activity to another; avoiding boredom from overextending an activity; "withitness" or a teacher's awareness of what is happening in all parts of the classroom. This style of teaching was also found characteristic of better student attendence, behavior and achievement by Rutter, et. al. (1979). Kounin and Obradovic (1971) further found that holding a student accountable for his learning and performance, providing challenging and a variety of activities, and "overlappingness" (the ability of the teacher to deal with two situations at once) were factors contributing to positive behavior and work involvement.

Specific skills in managing behavior are indicated as important variables by Kounin's (1970) research on kindergarten aged students (Charles, 1981). These findings indicate that teacher clarity (naming the child, the unacceptable behavior, and reasons for its unacceptability) tended to increase conformity in those students viewing the encounter; firmness (projection of a firm attitude accompanied by follow-through until the behavior ceased) increased conformity for only those students who at the time were behaving inappropriately; and roughness (anger, punishment,

physical and confrontation, threatening) did not improve the misbehavior, but did upset the other pupils in the classroom

A negative relationship between teacher use of criticism and student's achievement was found by Rutter et. al. (1979), Parker, Larsen and Roberts (1981), and Kounin (1970). Conversely, a high level of praise was found as demonstrated by effective regular education teachers (Larrives 1981). The effect of praise, along with opportunities for student-teacher interaction, was found to correlate with the achievement of first grade pupils (Parker, Larsen and Roberts, 1981). Kandil (1980) also concluded that praise increased creative thinking ability of emotionally handicapped pupils.

Even though skills in successful behavior management and specific approaches to teaching have been shown to differentiate between successful and the not-so-successful, the personal qualities still seem to shine through. A teacher whose emphasis is on positive approaches, who is capable of providing a pleasant working atmosphere, who believes that students can do well and feels free to tell them so, are all personal qualities as well as skill competencies. This supports that both facets, each influencing and reacting with the other, are parts which need to be included within the aspect of professionalism.

Rights to be Gained Through Professionalism

Professionalism has seemed to conjur up all kinds of negative images recently. To some this term implies a separation of service providers from service recipients. Others may think this term embodies the separation which leads to an inability of those working under such a heading to perceive the actual needs of those whom they are serving. As we have implied throughout this paper, our bias around this term, however, is more positive. Much of this paper has dealt with the tremendous expectations associated with competent teaching and the problems we perceive that teachers of the behaviorally impaired have experienced related to professionalism. In this section we will discuss the gains we feel are possible through increased professionalism. As with our other sections we offer these comments with appropriate humility!

"Diagnostic and Placement Decisions."

Teachers should have a role in assisting other professionals in diagnostic and placement decisions for behaviorally impaired students. By this we mean input and not sole decision making power. We believe strongly, a stance consistent with federal statutes, that no single person should have sole decision making in such matters, but it is obvious that the teacher, by virtue of his/her intense and consistent contact with behaviorally impaired students, has a valuable assistive role to play in the diagnosis and placement of such students. But

what type of input and assistance can you provide in this area? In order to explain our position on this we need to digress a bit and discuss the overall area of assessment of behavioral deviance in the school setting.

The decision to identify a youngster as behaviorally impaired should be based on multiple sources of information used to make such a determination. As O'Leary and Johnson (1979) state in relation to the diagnosis of behavioral deviance:

"Given the problems of reliability and validity of all of our assessment techniques, examiners would be wise not to make sweeping generalizations about a child's behavior on the basis of any single isolated piece of information. Instead, we recommend that the examiner look for convergences and divergences across a number of different data sources." (p. 240)

Despite this professional conclusion as well as the requirements under Public Law 94-142 regarding multiple sources of information needed in decision making regarding handicap determination, it appears that more traditional types of assessment areas such as intellectual and academic assessments are more likely to comprise the data used to identify and place behaviorally impaired children than more directly behaviorally relevant information such as systematic observations, behavioral checklists/rating scales or sociometric data (Zabel, Peterson, Smith and White, 1981).

It is our opinion that the following classes of information are needed to identify any student as behaviorally impaired and to plan an appropriate program accordingly. These are (1) setting analysis data describing the setting from which a student is being referred and will, hopefully, return; (2) measures of the perceived behavior of the referred student via such instrumentation as rating scales or checklists; (3) measures of the referred student's actual behavior pattern documented with systematic observations; (4) affective assessment information such as self-concept inventories or locus of control measures; (5) academic assessment information, both norm-referenced and criterion-referenced; (6) home/family information; (7) social functioning data; and (8) intellectual functioning information. For those seeking further elaboration of these areas of data collection Smith and Grimes (1979) present a more detailed discussion.

We realize that some may believe that such an extensive collection of data may be more than what is needed or can be feasibly expected. In response to such a stance we agree with Ysseldyke (1978) who states:

"This author has little regard for time considerations. If educational personnel are making educational decisions about chil- dren, decisions that directly and significantly affect children's life opportunities, they should be using non-discriminatory pro-

cedures in assessment." (p. 160)

It is our contention that by requiring the gathering of multiple sources of information delineated above we are moving to a non-discriminatory assessment in the area of behavioral deviance. These procedures assure that a pupil is not identified on the basis of one person's subjective opinion that the youngster is behaviorally impaired.

Along with this advocacy for multiple sources of information in decision making we also believe in the collection of educationally relevant information, such as that you are in a position to assist with, in determining that a student is behaviorally impaired. To look at this more closely we need to briefly discuss the different ways of viewing behavioral deviance; views that affect who we identify and how we program in our public schools.

In the field of psychological and/or personality assessment there has, historically, been a dichotemization in theoretical approaches. Some have referred to this as the "state vs. trait" debate in personality assessment.

The state theorists (see, for example, Mischel, 1969; Goldfried and Kent, 1972; Nelson, Hay and Hay, 1977) tend to view deviant behavior as being under the control of the immediate environment with deviant behavior being highly changeable from one setting to another. In relation to assessment, Goldfried and Kent (1972) compared traditional versus behavioral personality assessment. These authors concluded that many of the underlying assumptions of traditional assessment such as behavioral consistency across settings have not been supported by empirical evidence.

In contrast to this view of deviance are the trait theorists (see, for example, Alker, 1972; Eysenck, et.al., 1970; Graham, et.al., 1973; and Watt, et.al., 1970). According to this view deviance is a subject specific variable which is manifested across settings. The work of Watt, Stolorow, Lubensky and McClelland (1970) illustrates this approach. These researchers reviewed the past school records of thirty hospitalized schizophrenic adults with similar school records for matched normal adults. They concluded that the behavior patterns of the adult schizophrenics, as demonstrated via school records, differed substantially from the matched normal group.

More recently it appears that rather than adopting either a state or trait stance that in reality both views are partially correct (Bowers, 1973; Mischel, 1975; Goldfried, 1977). In examining how these trait versus state perceptions might be applied to behaviorally impaired students in special education classes the study we cited earlier (Peterson, Zabel, Smith and White, in press) report data from 683 teachers of behaviorally deviant students in three midwestern states. As part of an overall survey dealing with re-

integration trends these teachers were asked to specify how many of their students would best be described as behaviorally disordered with behavior problems presented in some settings but not in others (state emphasis) as opposed to truly emotionally disturbed presenting behavior problems in all settings (trait emphasis). The results of this survey indicate that teachers perceive the presence of both of these types of students in their programs with the majority of such students being described as behaviorally disordered.

So what does all this mean in relation to your input in the assessment process? The current state of assessment research adds further weight to the questions being asked about many of our prevalent assessment procedures. For example, after looking at the research cited above, does it make sense to remove a child to an isolated setting (whether it be a testing room or a hospital clinic miles from school) to assess the child's deviance (a trait approach) and to return the child with a diagnosis of behaviorally impaired? As Wiltz (1973) describes:

"Seeing a child in a small room or office, where little realistic interaction can occur, has severe limitations. The child's behavior is likely to be influenced by the novelty of the situation, in which he is confronted by a strange adult in a strange environment, and is the central focus of that adult's attention. The therapist in the office has no means of determining whether the child's behavior is normal or is an artifact of the setting." (p. [illegible])

Such comments as these reinforce the need for the type of information you can provide and/or assist gathering. Anecdotal comments and observational data of classroom functioning is necessary and useful for both initial assessment purposes as well as determining when a child is prepared to return to the regular class setting. Although it may be an error to insist upon a purely state assessment of potentially behaviorally impaired students it certainly seems reasonable that a large portion of such an assessment should be of a state nature. Perhaps the best way to summarize our biases in this discussion of the importance of your role in diagnosis, and as a justification for our prolonged digression on this point, is presented by Lewis (1966) who states:

"If, on the one hand, educators conceive of disordered behavior as a function of underlying pathology, their role is a relatively passive one, encompassing identification of emotionally disturbed children in classrooms and operating special classes under the guidance of psychotherapeutically oriented mental health professionals. If, on the other hand, educators conceptualize disordered behavior in terms of inadequate social learning and specific educational deficits, their role becomes more active, in fact paramount, in the generation of special programs." (p. 572)

"When a Student is Inappropriate for Your Program"

This discussion regarding placement and reintegration decisions leads to another thorny problem faced by teachers of the behaviorally impaired. Rather than systematic reintegration, what do you do if a student is placed in your program and it quickly becomes apparent that your program cannot adequately serve such a student? In some cases this may be a student you feel needs more than your program can offer. And let's further complicate the picture by saying that others with whom you work say that there is nothing that can be done. What can be done?

It is our perception that the way not to deal with this is to complain to professional peers, notably in the teacher's lounge and to dominate your at home conversations with perpetual complaining. This may be a prime manifestation of the learned helplessness phenomenon we discussed earlier.

Instead of this, we recommend and believe that the firmest step you can take begins by gathering very specific data regarding the inappropriateness of the current placement. This includes observational data, recording of specific events and copies or correspondence with others regarding the situation. Factors that need to be specifically examined include: (1) The pupils progress, both academically and behaviorally, within his/her present individual educational program (IEP); (2) The restrictiveness and structure of the program which has thus far been provided; (3) The documented management strategies, and the results of these, which have been implemented; and (4) Documentation of unmanageable behavior which has been demonstrated by the pupil in school.

It is also imperative that you have made appropriate attempts to involve the parents of the child in your program and have an idea of the relationship between home and school behavior. If the situation reaches the point where residential treatment is required such a sharing of perceptions regarding the seriousness of the problems is imperative. As Auger (1975) points out:

"A child's progession from home and school to a treatment facility can hardly be justified if parents of behaviorally deviant children, public school teachers, and special education teachers within the residential treatment center do not share a common frame of reference as to what shall be called seriously deviant behavior." (p. 867)

It has been our experience that the degree of agreement between home and school is the most vital element in assuring residential placement for students who need such an alternative.

But let's return to what you can do in the school setting following the compilation of information outlined above. If this information supports your contention regarding the inappropriateness of the current program it would seem appropriate to

request the input from others (principal, school psychologist, etc.) and perhaps hold a new staffing meeting. At that time other options can be explored with responsibilities assigned for follow-up. Most importantly, remember that the problem is not yours alone, although others may wish it so. Federal statutes point to shared responsibilities in programming.

Some have misinterpreted the federal mandate and comparable state mandates in special education regarding the "least restrictive environment" to mean that all youngsters, regardless of their behavior, must be programmed for in the public school. This is not true. Although there are many pupils manifesting behavioral deviance who still await an appropriate special education program, there are some students who have been provided such programs and services and do not appear to be gaining from such experiences.

Although programs designed for students identified as behaviorally impaired are designed to deal with deviant behavior, there <u>are</u> limitations in the behaviors which one can expect to be dealt with adequately in such programs. An example of this would be physical aggression against a teacher. At one time there was a fairly prevalent notion that all such behaviors should be dealt with by the classroom teacher. At the elementary level this may be feasible through the use of such procedures as time-out and physical restraint. Even with these procedures it is important to thoroughly examine their use (Smith, 1980).

However, especially in secondary programs serving behaviorally impaired students, alternative procedures for dealing with aggression against teachers need to be defined. Following a qualitative look at aggressive behavior (Smith, 1980) it may be necessary to establish a procedure for contacting law enforcement authorities with appropriate charges pressed by the target teacher. This is but one example of the need for defining the extent to which the school will deal with deviant behavior. Other examples include manifestly endangering the safety of fellow students and illegal behavior such as possession of illegal drugs.

The most paramount consideration in taking actions such as these is to make sure that the unacceptable acts exhibited by a given student are not the result of inadequate behavior management for your classroom in general. If this is the case, get help. In such a case it would be unfair to penalize one student for what is the general standard of behavior for your classroom. This is something we have to protect against in looking at the students referred to our program, let's not make the same mistake!

What about other alternatives to our program? Among the alternatives which may be considered are: (1) homebound instruction; (2) referral to the Department of Mental Health or Social Services; and (3) referral to the juvenile court system.

Homebound instruction is an

alternative in most states for behaviorally impaired students when it has been determined by a diagnostic educational team that such a placement is appropriate. It is important, however, to use such an option cautiously and for specific reasons. Such an option should be of specified short-term duration with specific goals and objectives in mind which are to be accomplished through the use of such an option.

Other cases arise in which residential placement is seen as a necessary provision in order to meet the special educational needs of a given pupil. It is important, first of all, that the diagnostic educational team verify the hypothesis, using the types of information outlined at the beginning of this section, that the only appropriate special education program for such a pupil is found within a residential setting. Following this it may be necessary for your Director of Special Education to be involved with mental health and/or the court system to secure the needed option.

We close this section with a note of caution. Too often we may want to give up too quickly or assert that a particular pupil must have residential placement when few alternatives have been tried in our public schools. Perhaps the most solid manner in which you and your school can establish either the need for program termination or residentially based programs is through the provision of alternatives within the public schools which have proven inadequate for a particular child or adolescent.

"Other Possible Gains."

There are two other areas we would like to discuss as possible gains for you, as a classroom teacher, through increased professionalism. These areas relate to teacher training and gaining further administrative support for programs.

You have the potential to influence teacher training in the area of the behaviorally impaired. Many of you are involved either in pursuing graduate studies yourself or in supervising the experiences of student teachers or practicum students. Rather than just being frustrated about the shortcomings of such programs it is important for you to provide objective information regarding the shortcomings of these programs. We need to avoid the situation as described by Smith (1972) who, in looking at special education training, states:

"...the system probably changes little through the years. This may be partially explained by the fact that the change agents (students) are constantly leaving and are only in residence for a short time. It is not uncommon to hear such statements as, 'Sure, there were plenty of things I felt should have been changed. But I just wanted to get my degree and get out of there. Then I'll work for change.' So it comes to pass that effective change can often only be initiated by more permanent members of the system, i.e., the faculty. Unfortunately these people often appear to have a vested interest in maintaining

the status quo." (p. 14-15)

Because of the inherent credibility teachers have by virtue of their close contact with students and the act of teaching, input from such sources has the potential for making a difference with training programs. We believe that your source of power for influencing training is a virtually unused resource that has the potential for greatly improving the quality of services to behaviorally impaired students. Aside from these preservice considerations, you are also in an ideal place to provide input into the inservice opportunities which should be provided to you. One possible avenue for such input in Nebraska may be the Support System Project for Behaviorally Impaired. Also don't forget your Department of Education which is most likely involved in either conducting inservices or contracting for the provision of such inservice.

We have also heard teachers speak of their inability to negotiate the needed flexibility and support within their particular administrative structure to provide the highest quality services to behaviorally impaired students. We believe that this is still another area where perceived professionalism plays a vital role.

Remember that it is quite possible that the area of educating the behaviorally impaired may be quite threatening and new to the administrators for whom you work. Two perceptions of such pupils may be the beginning premises from which these persons have been prepared to deal with behaviorally impaired students. The first of these would be the philosophy that the primary means of dealing with such students is through a firmer structure and more discipline. If this doesn't work, and with many of the pupils with whom we deal such an approach does lead to failure, the conclusion might be drawn that the situation is so complex that only mental health services can make a difference, even in our public schools. This leads to the situation of hiding behind the cloak of EDism such as we described earlier.

We believe that your ability to have accepted proposed alternatives to either of these approaches is directly influenced by your general competency in the eyes of the perceiver (your administrator!) There are several questions you should be able to answer in presenting proposals related to program changes. Among these are: (1) What has been used before that either needs to be modified or changed; (2) On the basis of what information are you making such a recommendation; (3) What is the rationale behind the particular approach being proposed; (4) Are there any legal or official state or local policies affecting the use of such procedures; and (5) How will this approach fit with the overall needs of the children with whom it will be used? This outline may be appropriate in viewing such diverse areas as disciplinary policies, academic expectations, non-traditional curriculum or behavioral approaches such as progressive

relaxation techniques or aversives in the classroom.

Final Thoughts

As we mentioned in the beginning of this paper we have approached the topics presented in a head on fashion realizing that it has been presumptious of us to address these issues in the first place. To our way of thinking, these issues are too important to avoid for fear of being wrong or judged foolish or naive by our colleagues. We have also presented our combined biases on topics where others may strongly disagree with the stances we have chosen to take. We did not intend to present a balanced discussion of each topic. We have faith in our colleagues that they will search out and examine alternative explanations for the various topics before arriving at conclusions and directions regarding their own professional behavior. In closing we would like to thank the staff of the Support System Project for Behaviorally Impaired for the opportunity to share our thoughts regarding the topic of professional and ethical issues related to teaching behaviorally impaired students.

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A Series of Reactions

A Reaction by:

Craig Beach
Superintendent
No. Platte Public Schools
North Platte, Nebraska

My general reaction to the paper by Smith and McGinnis is favorable. They covered a tremendous amount of ground in a relatively brief fashion. The paper was readable except for a few technologically heavy sections. The paper was helpful to me as a person who has little background or training in the area of the Behaviorally Impaired. The sections regarding professionalism and preservice training needs were especially revealing to me as an administrator.

I feel their comments on the need for teachers of the Behaviorally Impaired to be effective in the collaboration with other professionals were excellent and I agree whole heartedly with them. All of the issues addressed in the paper were important and some are crucial to the existance of programs in Nebraska. The state vs. trait problem is a concern that I'm sure my colleagues in western Nebraska would like to comment on since we're faced with sending students hundreds of miles from the classroom for an evaluation.

In my experience as an administrator I have found that if a teacher needs improvement in the skill areas (i.e. behavior management), that can be dealt with through an inservice approach, but if the problem stems from the basic personality makeup of the teacher it is fruitless to attempt change.

Nebraska's problem, as those of us in western Nebraska know it, is that the programs for students who have severe impairments are almost nonexistent. Programs can be delivered only when administrators feel it is appropriate and worthwhile and then only if personnel is available. In western Nebraska existing staff members must be retooled to fill the vacancies which will be available if someone can convince school districts to initiate programs. The major problems which exist stem from lack of identified children and consequently lack of programs.

Smith and McGinnis made some comments that are applicable to me in my situation. The need for all people involved with a behaviorally impaired child to have a common frame of reference as to what is called deviant was helpful to me. I appreciated their comment concerning the fact that districts must at times admit that even a separate classroom is insufficient programming for some students. Their thoughts about inservice needs reinforced my ideas regarding the development of more regional or state inservice opportunities due to the sparsity of professionals in this portion of the state.

I enjoyed reading the article and believe I gained a lot from the time spent with it.

A Reaction by:

Frances Clark
BI Teacher
Pershing School
Lincoln, Nebraska

After reading Smith and McGinnis's paper on issues related to behaviorally impaired students, I was overwhelmed by a feeling of imperfection and fear of failure. What am I doing trying to teach B.I. students? A severe case of learned helplessness. I realize no one teacher could ever be all the things Smith and McGinnis advocates for successfully teaching B.I. students. But I'd sure like to try.

My second reaction to the paper was a reflection of my professional growth. I've come a long way in two years as a BI teacher. Last year I was more of a behaviorist who tended to become detached and impersonal when dealing wih extreme behavior problems. This year I've taken an active role as a counselor in the classroom, not only during student's disruptions but when a student shows signs of stress and/or frustrations. I feel a mixture of the two is necessary for reaching deviant students.

While relating the paper to my own personal profession, I know that the same profession can be affected by state-wide issues such as funding for special education. Smith and McGinnis provide a good case for the necessity of special education programs for problem students. It reveals the almost impossible undertaking by BI teachers in the school systems. The special educator attempts to provide an equal education to all individuals who have not succeeded in the regular classroom. I see this area of education essential for accommodating to the ever changing society.

Writing these reactions down makes me less afraid of failure, and better able to face my job as a true profession. A profession in which I know I am learning and growing in strength and endurance. The mere fact that I feel far from burnout (though the number of students assigned to me are only four) is evidence that I am adjusting to situations around me and performing in a way I feel is working with problem children, staff members and parents.

A Reaction by:

Janet Coleman
BI Teacher
Lincoln East Jr. High
Lincoln, Nebraska

It is my opinion that most teachers consider themselves to

be professionals. This is not a status reserved just for teachers of behaviorally impaired or other special education students, but is the province of all teachers. Special education teachers do not achieve credibility in the eyes of the regular classroom teacher by setting themselves apart as "special" professionals.

Administrative support, it seems to me, is most often obtained when teachers of the behaviorally impaired establish themselves as competent teachers with skills that they are willing to share with others in the building; when they ask for needed help from adminstrative personnel; and when their students show improvement however minimal it may be. The behaviorally impaired teacher who decries the lack of administrative support often has not earned the support.

When discussing the behaviorally impaired student, it is important to recognize the distinction between terminology that is more appropriately related to the medical community and terminology which is educationally related. Too often the attempts to reach an adequate definition have resulted in excluding from the classroom those students with whom behaviorally impaired teachers are most likely to affect change. Many behaviors which are identified as disruptive to regular classrooms and which lead to the naming of students as behaviorally impaired are specific to the school setting and are those most likely to be remediated by special education teachers. Those students who more closely resemble a medical model label of emotionally disturbed are less likely to profit from an educational model which does not include the assistance of psychotherapeutic professionals.

In the assessment process, it is extremely important to give significance to the observations of the teachers and administrators who see the child on a daily school basis. As noted in the paper, professionals who observe a child only in a clinical setting are unlikely to have a true appreciation for the problems observed in a group setting in school.

A Reaction by:

Terry Hansen
School Psychologist
Fremont Public Schools
Fremont, Nebraska

My general reactions towards the paper were positive and quite supportive of the point of view expounded. I feel strongly about the "professional" status of all educators and especially those involved with "special needs" students. The paper is somewhat overwhelming in its delineation of the personal and academic characteristics that are required of BI teachers, but this abundance of talent coordination emphasizes the professional nature of teaching.

I found the paper helpful in

the sense of expanding on the many role functions of a BI teacher. It emphasized strongly the range of jobs and duties that the BI teacher must coordinate to be "successful" and also the continuum of services such a role entails. Both indirect and direct services are important role assignments. I feel strongly about the importance of collaborative efforts and joint problem solving and shared responsibility for BI services. Teaming is an essential factor and the BI teacher cannot function in isolation.

From my experiences, I see the coordination of staff efforts and joint problem solving as a major deficit area in the programming for BI students. Such cooperation is essential for individualization, reintegration and goals for behavior. Too often staff seem to be working in isolation with minimal support from each other. As a school psychologist, I feel some responsibility for establishing and maintaining consultative follow-up between staff.

The paper is quite timely in relation to my current situation, in which the development of a secondary BI program is under way. The presented role model for BI staff is especially welcome and will be shared with relevant personnel. The issues covered stress many important areas which provide a good framework for an inservice program for staff being introduced to a BI program in their building.

A Reaction by:

Betty Hofstad
BI Teacher
Lincoln East Jr. High
Lincoln, Nebraska

The main issues raised in the paper were important and interesting. The style bothered me in some instances -- parts seemed disjointed.

The references to research concerning teacher skills and traits are excellent. College training should include an awareness and development of these competencies.

In regard to the description of teacher dissatisfactions (p. 13), my feeling is that Lincoln East Jr./Sr. High generally is supportive of BI teachers. Some of the other syndromes mentioned are important and should be reassuring to the BI teacher.

I was not particularly interested in other professional's involvement in the BI field as I am personally unaware that this problem exists. The material on the I.E.P. seemed important and well placed. The characteristics of good teachers as cited by various studies was interesting. The section on "Diagnostic and Placement Decisions" was very important and should be stressed to teachers. Again, I feel Lincoln East does well in this area. However, Nebraska does not do a very good job of providing alternatives for inappropriately placed BI students particularly at the secondary level.

The challenge to BI teachers provided in this paper to influence teacher training and administrative support s excellent.

A Reaction by:

Arlene Michael
Professor, Special Education
University of Nebraska-Omaha
Omaha, Nebraska

My thanks to Carl Smith and Ellen McGinnis for their willingness to a) put their thoughts together and present them and b) take the risks to deal with professionalism and ethics. I, for one, view their behavior as responsible rather than presumptuous, and would like to see these issues put forward for more study and discussion. The paper deals largely with the issues related to professionalism and its concomitant descriptions, characteristics and value to the individual. As in most areas of education, ethics is given only a brief and general consideration.

Characteristics of Professionalism

Carl and Ellen have described the views from a variety of "position papers" written by persons prominent in the field of teaching the behaviorally impaired. They agree, with others, that the competencies that teachers may be described as both a scientist and an artist who possesses a cluster of identified skills and who applies these skills artfully to achieve the identified goals.

As a scientist, the teacher should have diagnostic and assessment skills, should be thoroughly familiar with curriculum, methods and materials, and should be skilled at evaluating outcomes and documenting them.

As an artist, the teacher must be able to apply the scientific skills with consideration for boldness, weaving, color, texture and sound as they effect the basic materials (persons) and are related to the identified goals. This implies skills in problem solving and decision making which are useful both inside and outside the classroom.

Professionalism in the Classroom

In citing the survey conducted by Lawrence and McKinnon (pg. 13), the authors refer to the finding that teachers consistently reported their most significant satisfaction resulted from relationships with students. This suggests that teachers view themselves as competent and successful as both scientists and artists within the classroom itself. Certainly there are failures, disappointments and feelings of uncertainty. Yet, for the most part, teachers manage to find alternative solutions and procedures which permit continued progress toward the goal. (In some cases, the goal itself must be modified.)

As a teacher trainer, I would conclude that training programs

may be effectively training the scientific skills of the teacher and leaving the artistic skills to chance or incidental learning. Once the teacher is "in charge" of the learning environment in his/her own classroom, the artistic skills develop as circumstances require.

This does not seem to be the case when the teacher is interacting with the larger educational community and/or the Mental Health professions.

Professionalism outside the Classroom

The authors identify two major problems in establishing our field as a profession: 1) the tendency to look to other professionals to define our work and 2) our tendency to hide behind the cloak of "EDism" (pg. 17).

Other professionals may include a principal or supervisor who evaluate the teacher, an administrator higher in the hierarchy who makes decisions about program continuation and/or support and other teachers and support personnel within the educational setting. I agree that too often teachers look to these professionals for direction and positive feedback. As teachers we seem to change from confident, competent professional persons in our classrooms to uncertain, inarticulate experimenters when interacting with other professionals. Are we really that unsure of ourselves? I think not. I believe a combination of circumstances are allowed to operate that tend to cause these results. First, we tend to lose sight of the scientific skills we have and use, and neglect to allow them to be properly represented. As a result, we are unable to develop those artistic abilities that permit us to successfully represent ourselves in the larger professional community.

As a teacher trainer, I have concern that our students exposed to few, if any, opportunities to interact with other professional persons involved with the Behaviorally Impaired during their training experience. The teacher in training and/or the newly trained teacher is confronted with 1) learning the jargon of medicine and psychology as well as other professions; 2) identifying the roles other professional persons play in the total treatment of the child and 3) identifying the strengths and limitations of the educators contribution to a total treatment of the child. We are unsure of how to talk with other professionals and how our competencies will be viewed, valued or de-valued by others.

I would like to offer two suggestions for training. First, that the professional language of other professions can often be taught along with "educationese" in our courses. Second, that the student have at least one clinical practicum experience in an interdisciplinary or transdisciplinary setting. Such experiences should provide the teacher with some skills as well as the opportunity to practice and refine those skills in an artisic manner.

I share with Carl and Ellen

the concern that the gap between education and medicine has not been bridged despite a great deal of rhetoric. Some progress has been made however. As our knowledge and skills as educators has increased, our role in the total treatment of the Behaviorally Impaired child has become more evident to others! Let's learn each others language and learn to articulate and model our own professional positions. I believe teachers are becoming strong enough, now, to make the first move. After all, we need each other.

A Reaction by:

Sheila Prescott
Director, Educational Therapy
Saint Joseph Center for Mental Health
Omaha, Nebraska

I found the review process stimulating and the article informative. The article, although somewhat lengthy, addressed many important issues.

I reviewed this article from the perspective of a former classroom teacher now working in the mental health field. I found the section which encourages teachers to share their observations and assessments with mental health professionals particularly important. I also would encourage classroom teachers to share their expertise before, during and after the hospitalization of a child. Many physicians and mental health professionals appreciate the contributions of classroom teachers and recognize that, next to parents, teachers have the most knowledge about these children. I would offer one word of caution, however. Although many educators are well-versed in medical and psychiatric terminology, do not expect medical and mental health personnel to be able to speak educationally.

I also read with interest the section that gave names such as "Implementation Despair" and "Helplessness Rage" to problem areas that are universal to special educators. This points out the need for increased communication and also will aid in concise communication between special educators. Terms such as these facilitate support between teachers who are experiencing similar problems.

The section on "Learned Helplessness" was also important to me. I agree that as teachers we must structure the environment for success and that we must re-evaluate our plan if it is not working. After we have gone through the process of planning and re-evaluating, we must not blame ourselves, for as the authors say, "There are some things we cannot change in our work." We need to increase our expectations of the child and parents. They are the ones who are making the decisions to succeed or to fail. And they are ultimately the ones who will be responsible for this success or failure.

Finally, I had some questions about the last section on the rights we stand to gain with increased professionalism. Although I can see the need to work for rights through increased professionalism, I wonder if these will ever be viable options in many large public school systems. I also would like some guidelines in forming expectations for administrators and help in means of gaining support from administrators. In addition, I would be interested in the authors' ideas of the direction special education will be taking in the future.